Form No.42-1409-1 (Internet 3/12)

IDWR / NORTH

IN THE DISTRICT COURT OF THE FIFTH JUDICIAL DISTRICT OF THE STATE OF IDAHO, IN AND FOR THE COUNTY OF TWIN FALLS

IN RE THE GENERAL ADJUDICATION OF RIGHTS TO THE USE OF WATER FROM THE COEUR D'ALENE-SPOKANE RIVER BASIN WATER SYSTEM

CIVIL CASE I	NUMBER: 49576
ID Number:	94-9451
Date Received:	11-12-15
	NO 315304
Amount:	Bv:

AMENDED

NOTICE OF CLAIM TO A WATER RIGHT ACQUIRED UNDER STATE LAW

JTO_94_5

Pk	ease type or prin	nt clearly				
1.	Name of claima	nt(s) Jackson Timberland Opp	ortunities -Tristar, LLC	Phor	ne 208-762-6641	
	Mailing address	654 N. State Street	Jackson	MS	ZIP 39202	
2.		Street or Box (only one (1) per claim) 7/30	/1968	State		<u> </u>
3.	Source of water	supply (check one) Ground V	Month Day Year (yyyy <u>Vater</u> () or Other (×) (a)		osebud Gulch	
	which is tributary	y to (b) Coeur d'Alene River				
4.	a. Location of p	oint of diversion is: Township	48N, Range 3	E	_, Section <u>14</u>	,
	SW 1/4 c	of <u>SE</u> 1/4, or Govt. Lot	_, B.M., County of Shost	none (Map ID	#356)	
	Parcel (PIN)	no				
	Additional po	ints of diversion if any: SWNE	Sec 23, T48N R3E (#300	6) & SESE Se	c 14, T48N R3E	(#1297)
	If available, G	SPS coordinates:				
	b. If instream flo	ow, beginning point of claimed	instream flow is: Townsh	nip qin	, Range	,
	Section	_, 1/4 of 1/4	, or Govt. Lot, B.M	l., County of _		
	ending point i	is: Township, Rai	nge, Section		1/4 of	1/4 or
	Govt. Lot	, B.M., County of				
5.	including the da	existing diversion works (dams ates of any changes or enla as enlarged and the depth of	argements in use, the	ells, pumps, p dimensions o	pipelines, headga of the diversion	ites, etc.), works as
	Portable pump (5 hp), truck mounted pump or	helicopter bucket.			

6.	Wa	ater is	claime	ed for	the fo	ollowi	ng pu	pose	s:	(hoth	dates	are inc	lueiva r	nm-dd)			(ofo)		(f==4)
	Fo	r Indu:	strial				DU	mose	s fron											
	Fo	r Fire	Protec	tion		_	— pu	rpose	s fron	03-0	01	to	12-01		amo	unt 0.	 2	_ or 0	.2 af/	 day
7.	To	tal qua	antity o	laime	ed (a)	0.2	<u> </u>					cfs) a	nd/or	(b) 0.:	2 af p	er da	y	_ 0' _		cre-feet
8.																				type and
																				control)
9.	a. b.	scription If wate If water use be	er is fo er is us	r irrig sed fo	ation, or other	indic: er pur	ate ac	reage , plac	e in ea e a s	ch si vmbo	ivibdu	sion i	n the f	tabula or dor	ition t nestic	elow.	ne cor	теѕрс	nding	place of
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11.	Do If yo	you ov	<i>n</i> n the swer i:	prop	erty li: descr	sted a ibe in	bove rema	as planks	ace of	use? he au) thorit	Yes (;	x) N have	o () to cla	im thi	s wat	er rial	nt		
12.		cribe															_		hove	
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13.	Rer	narks:				_		-							_				_ 01 14	one (x)
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Map of project: Attach aerial photograph or topographic map showing clearly the point of diversion, place of use, section number, township, and range number, unless unavailable. Otherwise sketch the elements above on the grid below.

Scale: 2 inches equals 1 mile

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Last name Jackson Timberland Opp-Tristar Identification no.

14.	. Basis of claim (check one) B	leneficial Use (×)	Posted Notice ()	License ()	Permit () Decree ()
	Court Decre	ee Date	Plaintiff v. Defenda	nt	
	If applicable, provide IDWR wa	ater right number _			
15.	Signature(s) a. By signing below, I/we ack you will receive notices in the b. I/We do () do not (×) wish.	he Coeur d'Alene-S	pokane River Basin	Adjudication".	
	Number of attachments: 1 mag	p & 1 list			
	For individuals: I/We do solemnly swear or a document are true and correct		y of perjury that th	e statements	contained in the foregoing
	Signature of claimant(s)				Date:
				,	Date:
	For organizations: I do solemnly swear or affirm to Chief Operating Officer		jury that I am _ of The Molpus Wo	odlands Grou	o, LLC
	Title			Organization	<u></u>
	that I have signed the foregoin authorized agent and property			land Opportur	sities-Tristar IIC
	Title	ariagei	_ 01 00000011 11111001	Organization	1
	and that the statements contain	ned in the forgoing	document are true a	nd correct.	
	Signature of authorized agent	Jan 1	co-	Da	te 11 10 15
	Title and organization Chief Op	perating Officer of	he Molpus Woodlan	ds Group, LLC	
16.	Notice of appearance: Notice is hereby given that I, _ at law of behalf of the claimant the claimant signing above sho	t signing above, and ould be mailed to m	d that all notices reque	uired by law to	will be acting as attorney be mailed by the director to
	Signature		Date		
	Address				

RECEIVED NOV 1 2 2015 IDWR/NORTH

		딥	PLACE OF USE	FUSE	1	CHM	ENT T	OCLA	ATTACHMENT TO CLAIM FORM, ALSO SEE ATTACHED MAP	M, AL	SO SE	ATT	KCHEL	MAI	_				
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TRACT				Nor	ortheast	theast Quarter	٦	Z	Northwest Quarter	Quarte	<u>.</u>	Sot	Southeast Quarter	Quarte	_	Sol	Southwest Quarter	Quarte	
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JTO_94_5	48N	3E	23	I/F	1/F	1/F	I/F	1/F		I/F	I/F	I/F	I/F	I/F	1/F	1/E	I/F	I/F	
JTO_94_5	48N	3E	24	I/F	1/F		1/F	1/F	I/F	1/F	I/F					I/F	I/F	_	I/F
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